I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Current Principal Place of Business: 1A BURTON HILLS BOULEVARD

SUITE 300 NASHVILLE, TN 37215

Current Mailing Address:

1A BURTON HILLS BOULEVARD SUITE 300 NASHVILLE, TN 37215 US

FEI Number: 81-4490589

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MEMBER	Title	SECRETARY
Name	AMSURG HOLDINGS, LLC	Name	REBER, PAIGE
Address	1A BURTON HILLS BOULEVARD SUITE 300	Address	1A BURTON HILLS BOULEVARD SUITE 300
City-State-Zip:	NASHVILLE TN 37215	City-State-Zip:	NASHVILLE TN 37215

SIGNATURE: PAIGE REBER SECRETARY

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: HEALTH NETWORK AMBULATORY ALLIANCE, LLC

FILED Mar 22, 2025 Secretary of State 3081845792CC

Certificate of Status Desired: No

03/22/2025 Date

Date